

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application) SECRATOF 4T Enterprises LLC 2. The complete street and mailing addresses of the initial designated/principal 281 South 1st East, Soda Springs, ID 83276 (Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: Carl Toupin (Name) 281 South 1st East, Soda Springs, ID 83276 (Street Address) 4. The name and address of at least one member or manager of the limited liab company: Name Address Carl Toupin 281 South 1st East, Soda Springs, ID 83276 5. Mailing address for future correspondence (annual report notices): 281 South 1st East, Soda Springs, ID 83276 6. Future effective date of filing (optional): Signature of a manager, member or authorized person.	^~
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6. Future effective date of filing (optional): Signature of a manager, member or authorized	
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Secretary of State use	nly
Signature	
Typed Name: Carl Tourin	
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Typed Name: CK: 3522 CT:	2 011 0 : 258024 BH: 08.00 ORGAI

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